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| Official Form 1 (4/07)  | d States P   | onkrunta  | x Court  |  | 71 10   |   |  |   |
|---|--|---|--|--|---|---|--|---|
|   | ed States B<br>Northern Dis  |   |  | L  |   |   | Volu   | ntary Petition  |
| Name of Debtor (if individual, enter Last, F King, Patrick  | irst, Middle):   |   |  | e of Joint I<br><b>ng, Mar</b> y   | Debtor (Spouse<br>/ Ann   | e) (Last, First,  | , Middle):   |   |
| All Other Names used by the Debtor in the (include married, maiden, and trade names):   |  |   |  |  | es used by the d, maiden, and   |   |  | ears  |
| Last four digits of Soc. Sec./Complete EIN (xxx-xx-4718   | or other Tax ID N  | O. (if more than one                                      |  | four digits  |   | omplete EIN   | or other Tax   | $\overline{\text{ID N}_{0}}$ . (if more than one, state all   |
| Street Address of Debtor (No. and Street, Ci<br>1409 Vine Avenue<br>Park Ridge, IL  | ty, and State):  | ZIP C   | 14<br>Pa   |  | of Joint Debtor<br>Avenue<br>e, IL  | r (No. and Str  | reet, City, and  | ZIP Code  |
| County of Residence or of the Principal Place   | ce of Business:  | 60068   | Cour   | ity of Resid   | dence or of the   | Principal Pla   | ace of Busines   | 60068   |
| Cook  |  |   |  | ook  |   |   |  |   |
| Mailing Address of Debtor (if different from  | street address):   |   | Mail   | ing Addres   | s of Joint Debt   | tor (if differen  | nt from street   | address):   |
|   |  | ZIP C   | ode  |  |   |   |  | ZIP Code  |
| Location of Principal Assets of Business De (if different from street address above):   | btor   |   |  |  |   |   |  |   |
| Type of Debtor  | N  | lature of Busin   | iess   |  | Chapter   | r of Bankrup  | otcy Code Un   | der Which   |
| (Check one box)  ■ Individual (includes Joint Debtors)  See Exhibit D on page 2 of this form.  □ Corporation (includes LLC and LLP)  □ Partnership  □ Other (If debtor is not one of the above entity check this box and state type of entity below.)   | Single A in 11 U. Railroad Stockbru Commo Clearing Other T (CC Debtor i under T) | oker<br>dity Broker                                       | tity cable) organization nited States  | defin<br>"incu   | oter 9<br>oter 11<br>oter 12  | of CH of                                       | a Foreign Ma napter 15 Petit a Foreign No. e of Debts c one box) | ion for Recognition in Proceeding ion for Recognition nmain Proceeding  Debts are primarily business debts. |
| Filing Fee (Chec  | `  | ie internar Reve  |  | k one box:   |   | Chapter 11  | •  |   |
| ■ Full Filing Fee attached □ Filing Fee to be paid in installments (appattach signed application for the court's is unable to pay fee except in installment. □ Filing Fee waiver requested (applicable attach signed application for the court's described in the court's desc | consideration cert<br>ts. Rule 1006(b).<br>to chapter 7 indiv                    | ifying that the d<br>See Official Form<br>iduals only). M | st Checc Che | Debtor i Debtor i k if: Debtor's to inside k all applie A plan i Accepta | s a small busing s not a small busing s aggregate not a small busing or affiliates) cable boxes:  s being filed w | ncontingent li<br>ncontingent li<br>n are less than<br>with this petition were solici | or as defined in equidated debt \$2,190,000.                     | U.S.C. § 101(51D). n 11 U.S.C. § 101(51D). s (excluding debts owed  from one or more § 1126(b).             |
| Statistical/Administrative Information  ☐ Debtor estimates that funds will be avail   | able for distributi  | on to unsecured   | l creditors.   |  |   | THIS  | SPACE IS FOR   | R COURT USE ONLY  |
| Debtor estimates that, after any exempt p   |  |   | trative expens   | ses paid,  |   |   |  |   |
| there will be no funds available for distr<br>Estimated Number of Creditors   | bution to unsecui  | red creditors.  |  |  |   | -   |  |   |
| 1- 50- 100- 200-<br>49 99 199 999   | 5,000 1  | 5001- 10,001<br>0,000 25,000                              | 50,000   | 100,001<br>100,000   | 100,000   |   |  |   |
| Estimated Assets  |  |   |  |  |   | -   |  |   |
| \$0 to \$10,000 \$100,000   | \$100,001<br>\$1 millio  |   | \$1,000,001 to<br>\$100 million  |  | More than<br>100 million  |   |  |   |
| Estimated Liabilities  \$ \$0 to \$ \$50,001 to \$ \$50,000 \$ \$100,000 \$   | \$100,001<br>\$1 millio  |   | \$1,000,001 to<br>\$100 million  |  | More than<br>100 million  |   |  |   |

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Voluntary Petition Name of Debtor(s):

| Voluntary                     | <b>Petition</b>  | Name of Debtor(s):  King, Patrick  |  |  |  |
|-------------------------------|--|--|--|--|--|
| (This page mus                | st be completed and filed in every case)   | King, Mary Ann   |  |  |  |
| 1 10                          | All Prior Bankruptcy Cases Filed Within Last   |  | ditional sheet)  |  |  |
| Location<br>Where Filed:      | - None -   | Case Number:   | Date Filed:  |  |  |
| Location<br>Where Filed:      |  | Case Number:   | Date Filed:  |  |  |
| Per                           | nding Bankruptcy Case Filed by any Spouse, Partner, or   | Affiliate of this Debtor (If more than   | one, attach additional sheet)  |  |  |
| Name of Debto                 | or:  | Case Number:   | Date Filed:  |  |  |
| District:                     |  | Relationship:  | Judge:   |  |  |
|                               | Exhibit A  |  | hibit B whose debts are primarily consumer debts.)   |  |  |
| forms 10K ar<br>pursuant to S | teted if debtor is required to file periodic reports (e.g., and 10Q) with the Securities and Exchange Commission ection 13 or 15(d) of the Securities Exchange Act of 1934 ting relief under chapter 11.)  | I, the attorney for the petitioner named<br>have informed the petitioner that [he o<br>12, or 13 of title 11, United States Cod  | in the foregoing petition, declare that I r she] may proceed under chapter 7, 11, le, and have explained the relief available fy that I delivered to the debtor the notice |  |  |
| ☐ Exhibit A                   | A is attached and made a part of this petition.  | X /s/ Gregory K. Stern   | June 27, 2007  |  |  |
|                               |  | Signature of Attorney for Debtor(s) Gregory K. Stern 6183380   | ` ,  |  |  |
|                               | Exh  | ibit C   |  |  |  |
|                               | own or have possession of any property that poses or is alleged to Exhibit C is attached and made a part of this petition.   | pose a threat of imminent and identifiable   | harm to public health or safety?   |  |  |
| Exhibit I  If this is a join  | eted by every individual debtor. If a joint petition is filed, each completed and signed by the debtor is attached and made and petition:  Delta also completed and signed by the joint debtor is attached and signed by the joint debtor is att | a part of this petition.   | separate Exhibit D.)   |  |  |
|                               | Information Regardin   | g the Debtor - Venue   |  |  |  |
| •                             | (Check any ap Debtor has been domiciled or has had a residence, principa days immediately preceding the date of this petition or for   | al place of business, or principal asset   | s in this District for 180   |  |  |
|                               | There is a bankruptcy case concerning debtor's affiliate, ge   | • .  | •  |  |  |
|                               | Debtor is a debtor in a foreign proceeding and has its princ<br>this District, or has no principal place of business or assets<br>proceeding [in a federal or state court] in this District, or the<br>sought in this District.  | cipal place of business or principal ass<br>in the United States but is a defendar<br>the interests of the parties will be serve | sets in the United States in<br>at in an action or<br>d in regard to the relief  |  |  |
|                               | Statement by a Debtor Who Resides<br>(Check all app  |  | I  |  |  |
|                               | Landlord has a judgment against the debtor for possession  | of debtor's residence. (If box checked,  | complete the following.)   |  |  |
|                               | (Name of landlord that obtained judgment)  |  |  |  |  |
|                               | (Address of landlord)  |  |  |  |  |
|                               | Debtor claims that under applicable nonbankruptcy law, th<br>permitted to cure the entire monetary default that gave rise<br>possession was entered, and   |  |  |  |  |
|                               | Debtor has included in this petition the deposit with the coafter the filing of the petition.  | urt of any rent that would become due  | e during the 30-day period   |  |  |

(This page must be completed and filed in every case)

## Signature(s) of Debtor(s) (Individual/Joint)

I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7.

[If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

#### X /s/ Patrick King

Signature of Debtor Patrick King

### X /s/ Mary Ann King

Signature of Joint Debtor Mary Ann King

Telephone Number (If not represented by attorney)

#### June 27, 2007

Date

#### Signature of Attorney

#### X /s/ Gregory K. Stern

Signature of Attorney for Debtor(s)

#### Gregory K. Stern 6183380

Printed Name of Attorney for Debtor(s)

#### Gregory K. Stern, P.C.

Firm Name

53 West Jackson Boulevard **Suite 1442** Chicago, IL 60604

Address

## (312) 427-1558 Fax: (312) 427-1289

Telephone Number

June 27, 2007

Date

#### Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

King, Mary Ann

#### Signatures

#### Signature of a Foreign Representative

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

- ☐ I request relief in accordance with chapter 15 of title 11. United States Code. Certified copies of the documents required by 11 U.S.C. §1515 are attached.
- ☐ Pursuant to 11 U.S.C. §1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

| <b>T</b> 7 |  |
|------------|--|
| ×          |  |
| $\Delta$   |  |

Signature of Foreign Representative

Printed Name of Foreign Representative

## Signature of Non-Attorney Bankruptcy Petition Preparer

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19B is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social Security number (If the bankrutpcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.)(Required by 11 U.S.C. § 110.)

Address

#### Date

Signature of Bankruptcy Petition Preparer or officer, principal. responsible person, or partner whose Social Security number is provided above.

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. §110; 18 U.S.C. §156.

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Official Form 1, Exhibit D (10/06)

# **United States Bankruptcy Court Northern District of Illinois**

| In re | Patrick King<br>Mary Ann King |           | Case No. |   |
|-------|-------------------------------|-----------|----------|---|
|       |                               | Debtor(s) | Chapter  | 7 |
|       |                               |           | •        |   |

# EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.
- □ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 15 days after your bankruptcy case is filed.
- □ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the five days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Must be accompanied by a motion for determination by the court.][Summarize exigent circumstances here.] \_\_\_\_

If the court is satisfied with the reasons stated in your motion, it will send you an order approving your request. You must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy case and promptly file a certificate from the agency that provided the briefing, together with a copy of any debt management plan developed through the agency. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. A motion for extension must be filed within the 30-day period. Failure to fulfill these requirements may result in dismissal of your case. If the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing, your case may be dismissed.

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## Official Form 1, Exh. D (10/06) - Cont.

| ☐ 4. I am not required to receive a credit counseling briefing because of: [Check the applicable            |
|---|
| statement.] [Must be accompanied by a motion for determination by the court.]                               |
| ☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or                  |
| mental deficiency so as to be incapable of realizing and making rational decisions with respect to          |
| financial responsibilities.);   |
| ☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being               |
| unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or |
| through the Internet.);   |
| ☐ Active military duty in a military combat zone.   |
| □ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling        |
| requirement of 11 U.S.C. § 109(h) does not apply in this district.  |

I certify under penalty of perjury that the information provided above is true and correct.

| Signat | ure of Debtor: | /s/ Patrick King |
|--------|----------------|------------------|
|        |                | Patrick King     |
| Date:  | June 27, 2007  |                  |

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Official Form 1, Exhibit D (10/06)

# **United States Bankruptcy Court Northern District of Illinois**

|       | Patrick King  |           |          |   |
|-------|---------------|-----------|----------|---|
| In re | Mary Ann King |           | Case No. |   |
|       |               | Debtor(s) | Chapter  | 7 |

# EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.
- □ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 15 days after your bankruptcy case is filed.
- □ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the five days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Must be accompanied by a motion for determination by the court.][Summarize exigent circumstances here.] \_\_\_\_

If the court is satisfied with the reasons stated in your motion, it will send you an order approving your request. You must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy case and promptly file a certificate from the agency that provided the briefing, together with a copy of any debt management plan developed through the agency. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. A motion for extension must be filed within the 30-day period. Failure to fulfill these requirements may result in dismissal of your case. If the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing, your case may be dismissed.

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## Official Form 1, Exh. D (10/06) - Cont.

| ☐ 4. I am not required to receive a credit counseling briefing because of: [Check the applicable            |
|---|
| statement.] [Must be accompanied by a motion for determination by the court.]                               |
| ☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or                  |
| mental deficiency so as to be incapable of realizing and making rational decisions with respect to          |
| financial responsibilities.);   |
| ☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being               |
| unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or |
| through the Internet.);   |
| ☐ Active military duty in a military combat zone.   |
| □ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling        |
| requirement of 11 U.S.C. § 109(h) does not apply in this district.  |

I certify under penalty of perjury that the information provided above is true and correct.

| Signature of Debtor | :/s/ Mary Ann King |  |
|---------------------|--------------------|--|
|                     | Mary Ann King      |  |
| Date: June 27, 2007 |                    |  |

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Form 6-Summary (10/06)

# **United States Bankruptcy Court Northern District of Illinois**

| In re | Patrick King,<br>Mary Ann King |         | Case No. |   |  |
|-------|--------------------------------|---------|----------|---|--|
| •     |                                | Debtors | Chapter  | 7 |  |

## **SUMMARY OF SCHEDULES**

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

| NAME OF SCHEDULE  | ATTACHED<br>(YES/NO) | NO. OF<br>SHEETS | ASSETS            | LIABILITIES | OTHER    |
|---|----------------------|------------------|-------------------|-------------|----------|
| A - Real Property   | Yes                  | 1                | 0.00              |             |          |
| B - Personal Property   | Yes                  | 4                | 21,570.00         |             |          |
| C - Property Claimed as Exempt  | Yes                  | 1                |                   |             |          |
| D - Creditors Holding Secured Claims  | Yes                  | 1                |                   | 12,562.95   |          |
| E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E) | Yes                  | 1                |                   | 0.00        |          |
| F - Creditors Holding Unsecured<br>Nonpriority Claims                           | Yes                  | 10               |                   | 25,789.90   |          |
| G - Executory Contracts and<br>Unexpired Leases                                 | Yes                  | 1                |                   |             |          |
| H - Codebtors   | Yes                  | 1                |                   |             |          |
| I - Current Income of Individual<br>Debtor(s)                                   | Yes                  | 1                |                   |             | 4,680.58 |
| J - Current Expenditures of Individual Debtor(s)                                | Yes                  | 1                |                   |             | 4,676.00 |
| Total Number of Sheets of ALL Schedu  | ıles                 | 22               |                   |             |          |
|   | T                    | otal Assets      | 21,570.00         |             |          |
|   |                      |                  | Total Liabilities | 38,352.85   |          |

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Official Form 6 - Statistical Summary (10/06)

# **United States Bankruptcy Court Northern District of Illinois**

| In re | Patrick King, |         | Case No | Case No. |  |  |
|-------|---------------|---------|---------|----------|--|--|
|       | Mary Ann King |         |         |          |  |  |
| -     |               | Debtors | Chapter | 7        |  |  |
|       |               |         |         |          |  |  |

# STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C.§ 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

| Type of Liability   | Amount |
|---|--------|
| Domestic Support Obligations (from Schedule E)  | 0.00   |
| Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E) (whether disputed or undisputed) | 0.00   |
| Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E)                          | 0.00   |
| Student Loan Obligations (from Schedule F)  | 0.00   |
| Domestic Support, Separation Agreement, and Divorce Decree<br>Obligations Not Reported on Schedule E        | 0.00   |
| Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)                   | 0.00   |
| TOTAL   | 0.00   |

#### State the following:

| Average Income (from Schedule I, Line 16)  | 4,680.58 |
|--|----------|
| Average Expenses (from Schedule J, Line 18)  | 4,676.00 |
| Current Monthly Income (from Form 22A Line 12; OR, Form 22B Line 11; OR, Form 22C Line 20) | 6,437.92 |

#### State the following:

| State the lone wing.   |      |           |
|--|------|-----------|
| Total from Schedule D, "UNSECURED PORTION, IF ANY"     column              |      | 2,137.95  |
| 2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column             | 0.00 |           |
| 3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column |      | 0.00      |
| 4. Total from Schedule F   |      | 25,789.90 |
| 5. Total of non-priority unsecured debt (sum of 1, 3, and 4)               |      | 27,927.85 |

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Form B6A (10/05)

| In re | Patrick King, | Case No. |
|-------|---------------|----------|
| _     | Mary Ann King |          |

**Debtors** 

### SCHEDULE A. REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, or both own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim."

If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

Description and Location of Property

Nature of Debtor's Interest in Property

Nature of Debtor's Interest in Property Loint, or Community

Nature of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption

Amount of Secured Claim

None

Sub-Total > **0.00** (Total of this page)

Total > **0.00** 

(Report also on Summary of Schedules)

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Form B6B (10/05)

| In re | Patrick King, | Case No. |
|-------|---------------|----------|
| _     | Mary Ann King |          |

# Debtors

### SCHEDULE B. PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, or both own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." In providing the information requested in this schedule, do not include the name or address of a minor child. Simply state "a minor child."

|    | Type of Property   | N O Description and Location of Property E  | Husband,<br>Wife,<br>Joint, or<br>Community | Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption |
|----|--|---|---|--|
| 1. | Cash on hand   | Cash  | J   | 80.00  |
| 2. | Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan,                    | First American Bank - checking account no. 1042720914 & savings account no. 1042720920  | J   | 1,100.00   |
|    | thrift, building and loan, and<br>homestead associations, or credit<br>unions, brokerage houses, or<br>cooperatives.             | National City - checking account no. 117580803  | Н   | 1,000.00   |
| 3. | Security deposits with public utilities, telephone companies, landlords, and others.   | X   |   |  |
| 4. | Household goods and furnishings, including audio, video, and computer equipment.   | Couch, Love Seat, Coffee Table, 2 End Tables, 2 Lamps, Piano, Table, Chest, Curio Shelf, TV Stand, TV, 2 Speakers, Area Rug, Chair, Table/4 Chairs, Rug, China Cabinet, Bed, Dresser/Mirror, Dresser, Night Stand, 2 Lamps, TV, Twin Bed, Desk Computer, Dresser, TV, Bed, Vanity/Mirror, Dresser Desk, Computer, Bed, Dresser/Mirror, Dresser, 2 Night Stands, Desk, TV, 2 Lamps, Book Shelf, Coffee Table, 2 End Tables, 2 Tables, Computer, Copy Machine, Sewing Machine, Book Shelf, Freezer, Etegere, TV Cabinet, Night Stand, Table/4 Chairs, Disher, TV, Snow Blower, Lawn Mower, 3 Bikes, Holiday Decorations, 4 Piece Place Settings Sterling Silver, Lennox China Serving Bowls, Platter & Gravy Boat, Waterford Crystal Goblets, HiBalls, Wine Glasses, Butter Dishes and Candy Dish, Lladro Figurines, Bedding, Linens, Appliances, Cookware, Kitchenware & Misc. Personal Property |   | 3,905.00   |
| 5. | Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles. | x   |   |  |
| 6. | Wearing apparel.   | Necessary Wearing Apparel   | J   | 1,600.00   |

7,685.00

Sub-Total >

(Total of this page)

<sup>3</sup> continuation sheets attached to the Schedule of Personal Property

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Form B6B (10/05)

| In re | Patrick King, | Case No. |
|-------|---------------|----------|
|       | Mary Ann King |          |

# Debtors

# SCHEDULE B. PERSONAL PROPERTY

(Continuation Sheet)

|     | Type of Property  | N<br>O<br>N<br>E | Description and Location of Property | Husband,<br>Wife,<br>Joint, or<br>Community | Current Value of<br>Debtor's Interest in Property,<br>without Deducting any<br>Secured Claim or Exemption |
|-----|---|------------------|--------------------------------------|---|---|
| 7.  | Furs and jewelry.   | X                |                                      |   |   |
| 8.  | Firearms and sports, photographic, and other hobby equipment.   | x                |                                      |   |   |
| 9.  | Interests in insurance policies.  | Zurich           | n Life - term life insurance         | Н   | 0.00  |
|     | Name insurance company of each policy and itemize surrender or refund value of each.  | Zurich           | n Life - term life insurance         | W   | 0.00  |
| 10. | Annuities. Itemize and name each issuer.  | X                |                                      |   |   |
| 11. | Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c); Rule 1007(b)). | X                |                                      |   |   |
| 12. | Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.   | X                |                                      |   |   |
| 13. | Stock and interests in incorporated and unincorporated businesses. Itemize.   | X                |                                      |   |   |
| 14. | Interests in partnerships or joint ventures. Itemize.   | X                |                                      |   |   |
| 15. | Government and corporate bonds and other negotiable and nonnegotiable instruments.  | X                |                                      |   |   |
| 16. | Accounts receivable.  | X                |                                      |   |   |
| 17. | Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.  | X                |                                      |   |   |
| 18. | Other liquidated debts owing debtor including tax refunds. Give particulars.  | X                |                                      |   |   |

Sub-Total > **0.00** (Total of this page)

Sheet <u>1</u> of <u>3</u> continuation sheets attached to the Schedule of Personal Property

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Form B6B (10/05)

In re Patrick King,
Mary Ann King

### Debtors

# SCHEDULE B. PERSONAL PROPERTY

(Continuation Sheet)

| Type of Property  | N<br>O<br>N<br>E | escription and Location of Property | Husband,<br>Wife,<br>Joint, or<br>Community | Current Value of<br>Debtor's Interest in Property,<br>without Deducting any<br>Secured Claim or Exemption |
|---|------------------|-------------------------------------|---|---|
| 19. Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.  | X                |                                     |   |   |
| 20. Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.  | X                |                                     |   |   |
| 21. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.  | X                |                                     |   |   |
| 22. Patents, copyrights, and other intellectual property. Give particulars.   | X                |                                     |   |   |
| 23. Licenses, franchises, and other general intangibles. Give particulars.  | X                |                                     |   |   |
| 24. Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes. | X                |                                     |   |   |
| 25. Automobiles, trucks, trailers, and  | 2006 Ford Tau    | us                                  | -   | 10,425.00   |
| other vehicles and accessories.   | 2000 Ford Foc    | ıs                                  | -   | 3,460.00  |
| 26. Boats, motors, and accessories.   | x                |                                     |   |   |
| 27. Aircraft and accessories.   | X                |                                     |   |   |
| 28. Office equipment, furnishings, and supplies.  | X                |                                     |   |   |
| 29. Machinery, fixtures, equipment, and supplies used in business.  | X                |                                     |   |   |
| 30. Inventory.  | Х                |                                     |   |   |
|   |                  |                                     | 0.1.77                                      | 10.005.00   |
|   |                  | T)                                  | Sub-Total of this page)                     | al > <b>13,885.00</b>   |

Sheet <u>2</u> of <u>3</u> continuation sheets attached to the Schedule of Personal Property

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Form B6B (10/05)

| In re | Patrick King, | Case No. |
|-------|---------------|----------|
|       | Mary Ann King |          |

#### Debtors

## SCHEDULE B. PERSONAL PROPERTY

(Continuation Sheet)

| Type of Property   | N<br>O<br>N<br>E | Description and Location of Property | Husband,<br>Wife,<br>Joint, or<br>Community | Current Value of<br>Debtor's Interest in Property,<br>without Deducting any<br>Secured Claim or Exemption |
|--|------------------|--------------------------------------|---|---|
| 31. Animals.   | Dog              |                                      | J   | 0.00  |
| 32. Crops - growing or harvested. Give particulars.                  | X                |                                      |   |   |
| 33. Farming equipment and implements.                                | X                |                                      |   |   |
| 34. Farm supplies, chemicals, and feed.                              | X                |                                      |   |   |
| 35. Other personal property of any kind not already listed. Itemize. | X                |                                      |   |   |

Sub-Total > 0.00 (Total of this page)

Total >

21,570.00

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Form B6C (4/07)

| In re | Patrick King, | Case No. |
|-------|---------------|----------|
|       | Mary Ann King |          |

Debtors

# SCHEDULE C. PROPERTY CLAIMED AS EXEMPT

| SCHEDULE C   | SCHEDULE C. I KOI EKI I CLAIMED AS EXEMI I       |                                  |   |  |  |  |  |  |
|--|--|----------------------------------|---|--|--|--|--|--|
| Debtor claims the exemptions to which debtor is entitled to (Check one box)  11 U.S.C. \$522(b)(2)  11 U.S.C. \$522(b)(3)  | Inder: Check if det \$136,875.                   | otor claims a homestead exer     | mption that exceeds   |  |  |  |  |  |
| Description of Property  | Specify Law Providing<br>Each Exemption          | Value of<br>Claimed<br>Exemption | Current Value of<br>Property Without<br>Deducting Exemption |  |  |  |  |  |
| Checking, Savings, or Other Financial Accounts, C<br>First American Bank - checking account no.<br>1042720914 & savings account no. 1042720920   | Certificates of Deposit<br>735 ILCS 5/12-1001(b) | 1,100.00                         | 1,100.00  |  |  |  |  |  |
| National City - checking account no. 117580803   | 735 ILCS 5/12-1001(b)                            | 1,000.00                         | 1,000.00  |  |  |  |  |  |
| Household Goods and Furnishings Couch, Love Seat, Coffee Table, 2 End Tables, 2 Lamps, Piano, Table, Chest, Curio Shelf, TV Stand, TV, 2 Speakers, Area Rug, Chair, Table/4 Chairs, Rug, China Cabinet, Bed, Dresser/Mirror, Dresser, Night Stand, 2 Lamps, TV, Twin Bed, Desk Computer, Dresser, TV, Bed, Vanity/Mirror, Dresser, Desk, Computer, Bed, Dresser/Mirror, Dresser, 2 Night Stands, Desk, TV, 2 Lamps, Book Shelf, Coffee Table, 2 End Tables, 2 Tables, Computer, Copy Machine, Sewing Machine, Book Shelf, Freezer, Etegere, TV Cabinet, Night Stand, Table/4 Chairs, Disher, TV, Snow Blower, Lawn Mower, 3 Bikes, Holiday Decorations, 4 Piece Place Settings Sterling Silver, Lennox China Serving Bowls, Platter & Gravy Boat, Waterford Crystal Goblets, HiBalls, Wine Glasses, Butter Dishes and Candy Dish, Lladro Figurines, Bedding, Linens, Appliances, Cookware, Kitchenware & Misc. Personal Property | 735 ILCS 5/12-1001(b)                            | 3,905.00                         | 3,905.00  |  |  |  |  |  |
| <u>Wearing Apparel</u><br>Necessary Wearing Apparel  | 735 ILCS 5/12-1001(a)                            | 1,600.00                         | 1,600.00  |  |  |  |  |  |
| <u>Automobiles, Trucks, Trailers, and Other Vehicles</u> 2000 Ford Focus   | 735 ILCS 5/12-1001(c)                            | 2,400.00                         | 3,460.00  |  |  |  |  |  |

Total: 10,005.00 11,065.00

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Official Form 6D (10/06)

| In re | Patrick King, | Case No. |
|-------|---------------|----------|
|       | Mary Ann King |          |

**Debtors** 

### SCHEDULE D. CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. § 112. If "a minor child" is stated, also include the name, address, and legal relationship to the minor child of a person described in Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Disputed". (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

| CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODEBTOR | Hu<br>H<br>W<br>J<br>C | DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN | COZH _ ZGWZH | 021-00-04FWD | U<br>T<br>E | AMOUNT OF<br>CLAIM<br>WITHOUT<br>DEDUCTING<br>VALUE OF<br>COLLATERAL | UNSECURED<br>PORTION, IF<br>ANY |  |  |  |
|--|----------|------------------------|--|--------------|--------------|-------------|--|---------------------------------|--|--|--|
| Account No. 040854962  | ╛        |                        | 2006   |              | ППС          |             |  |                                 |  |  |  |
| Ford Credit<br>P.O. Box 542000<br>Omaha, NE 68154-8000   |          | н                      | Retail Installment Contract - Motor<br>Vehicle<br>2006 Ford Taurus                             |              | ם            |             |  |                                 |  |  |  |
|  | _        |                        | Value \$ 10,425.00   |              |              |             | 12,562.95  | 2,137.95                        |  |  |  |
| Account No.  |          |                        | Value \$ Value \$  |              |              |             |  |                                 |  |  |  |
| Account No.  |          |                        |  |              |              |             |  |                                 |  |  |  |
| continuation sheets attached   |          |                        | Value \$ S (Total of the   | ubt          |              |             | 12,562.95  | 2,137.95                        |  |  |  |
|  |          |                        | (Report on Summary of Sc   | T            | ota          | 1           | 12,562.95  | 2,137.95                        |  |  |  |

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Official Form 6E (4/07)

| In re | Patrick King, |         | Case No. |  |
|-------|---------------|---------|----------|--|
|       | Mary Ann King |         |          |  |
| _     |               | Debtors | ,        |  |

### SCHEDULE E. CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. § 112. If "a minor child" is stated, also include the name, address, and legal relationship to the minor child of a person described in Fed. R. Bankr. P. 1007(m).

| If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the approp schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." If the claim is disputed, place an "X" in the column labeled "Disputed." If the claim is disputed, place an "X" in the column labeled "Disputed." If the claim is disputed, place an "X" in the column labeled "Disputed." If the claim is disputed, place an "X" in the column labeled "Disputed." If the claim is disputed, place an "X" in the column labeled "Disputed." If the claim is disputed, place an "X" in the column labeled "Disputed." If the claim is disputed, place an "X" in the column labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts who file a under chapter 7 report this total also on the Statistical Summary of Certain Liabilities and Related Data.  Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not en | beled<br>beled<br>ty<br>nder |
|--|------------------------------|
| Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.  |                              |
| TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)  |                              |
| □ Domestic support obligations  Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).   | ve of                        |
| □ Extensions of credit in an involuntary case  Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a or the order for relief. 11 U.S.C. § 507(a)(3).   | a trus                       |
| ☐ Wages, salaries, and commissions   |                              |
| Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$10,950* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).   | S                            |
| ☐ Contributions to employee benefit plans  |                              |
| Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of busines whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).   | ss,                          |
| ☐ Certain farmers and fishermen  |                              |
| Claims of certain farmers and fishermen, up to \$5,400* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).   |                              |
| □ Deposits by individuals  Claims of individuals up to \$2,425* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not deliprovided. 11 U.S.C. § 507(a)(7).   | ivered                       |
| ☐ Taxes and certain other debts owed to governmental units   |                              |
| Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).  |                              |
| ☐ Commitments to maintain the capital of an insured depository institution   |                              |
| Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).   | ıl                           |
| Claims for death or personal injury while debtor was intoxicated  Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or anoth  | her                          |
| substance. 11 U.S.C. § 507(a)(10).   | 101                          |

**0** continuation sheets attached

<sup>\*</sup> Amounts are subject to adjustment on April 1, 2010, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

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Official Form 6F (10/06)

| In re | Patrick King, |         | Case No. |  |
|-------|---------------|---------|----------|--|
|       | Mary Ann King |         |          |  |
|       |               | Debtors |          |  |

## SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. § 112. If "a minor child" is stated, also include the name, address, and legal relationship to the minor child of a person described in Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts filing a case under chapter 7, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

| CREDITOR'S NAME,<br>AND MAILING ADDRESS<br>INCLUDING ZIP CODE,<br>AND ACCOUNT NUMBER | CODEBT | H<br>H<br>W | CONSIDERATION FOR CLAIM. IF CLAIM | C O N T I        | UNLLQUL          | DISPUTED | AMOUNT OF CLAIM |
|--|--------|-------------|-----------------------------------|------------------|------------------|----------|-----------------|
| (See instructions above.)  | O<br>R | C<br>1      |                                   | N<br>G<br>E<br>N | I<br>D<br>A<br>T | Ę        | AWOUNT OF CLAIM |
| Account No. 177900, 214450   |        |             | 2005, 2006<br>Services            | Ť                | T<br>E<br>D      |          |                 |
| Advanced Radiology Associates, SC  |        | \<br>w      |                                   |                  | +                | t        |                 |
| c/o Illinois Collection Service, Inc. PO Box 646                                     |        | <b>"</b>    |                                   |                  |                  |          |                 |
| Oak Lawn, IL 60454-0646  |        |             |                                   |                  |                  |          |                 |
|  |        |             |                                   |                  |                  |          | 29.00           |
| Account No. 061 2 0000214450   | 1      | T           | 2006 & 2007                       |                  | T                |          |                 |
| Advanced Radiology Consultants, SC   |        |             | Services                          |                  |                  |          |                 |
| 520 East 22nd Street   |        | w           | 1                                 |                  |                  |          |                 |
| Lombard, IL 60148  |        |             |                                   |                  |                  |          |                 |
|  |        |             |                                   |                  |                  |          | 36.09           |
| Account No. <b>00325240,2324068,00310775</b>   | ╁      | ╁           | 2006 & 2007                       | +                | ╁                | ╁        | 00.00           |
|  | 1      |             | Services                          |                  |                  |          |                 |
| Advocate Medical Group   |        | ١,,         |                                   |                  |                  |          |                 |
| PO Box 92523<br>Chicago, IL 60675-2523   |        | M           |                                   |                  |                  |          |                 |
| omougo, 12 00070 2020  |        |             |                                   |                  |                  |          |                 |
|  |        |             |                                   |                  |                  |          | 837.31          |
| Account No. 322453747, 322369893 & Ithers  |        | T           | 2007 & prior year                 |                  | T                |          |                 |
| Advanta Lutharan Canasa Usaa Kal   |        |             | Services                          |                  |                  |          |                 |
| Advocate-Lutheran General Hospital P.O. Box 73208                                    |        | w           | /                                 |                  |                  |          |                 |
| Chicago, IL 60673-7208   |        |             |                                   |                  |                  |          |                 |
|  |        |             |                                   |                  |                  |          | 0.000.00        |
|  |        |             |                                   |                  |                  |          | 2,886.92        |
|  |        |             |                                   | Sub              | tot              | al       | 1               |

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Official Form 6F (10/06) - Cont.

| In re | Patrick King, | Case No |
|-------|---------------|---------|
| _     | Mary Ann King | ·       |

|   | 1.       | _           |   |             | -     |      | -    | 1               |
|---|----------|-------------|---|-------------|-------|------|------|-----------------|
| CREDITOR'S NAME,  |          | Н           | usband, Wife, Joint, or Community                                   |             | COZ   | DZ.L | D    |                 |
| AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)  | CODEBTOR | C<br>A<br>M |   | AIM         | I N   |      | SPUT | AMOUNT OF CLAIM |
| Account No.   | 1        | T           | Advocate-Lutheran General Hospital                                  |             | Ť     | T    |      |                 |
| Representing:<br>Advocate-Lutheran General Hospital   |          |             | 1775 Dempster Street<br>Park Ridge, IL 60068                        |             |       | ĽD.  |      |                 |
| Account No. 534601124,701346595 & others  Alexian Brothers Medical Center 800 Biesterfield Road Elk Grove Village, IL 60007 |          | J           | 2006<br>Services  |             |       |      |      |                 |
|   |          |             |   |             |       |      |      | 1,392.95        |
| Account No.   |          |             | Malcolm S. Gerald and Associates,                                   |             |       |      |      |                 |
| Representing:<br>Alexian Brothers Medical Center  |          |             | Inc.<br>322 South Michigan Avenue<br>Suite 600<br>Chicago, IL 60604 |             |       |      |      |                 |
| Account No. 4862-3623-8476-8449   |          | T           | 2006 & prior years  |             |       |      |      |                 |
| Capital One Bank<br>P.O. Box 30285<br>Salt Lake City, UT 84130-0285   |          | v           | Periodic Purchases  |             |       |      |      | 3,486.53        |
| Account No.   | 1        | t           | Blatt, Hasenmiller, Leibsker & Moore                                |             |       |      |      |                 |
| Representing:<br>Capital One Bank   |          |             | 125 South Wacker Drive<br>Suite 400<br>Chicago, IL 60606-4440       |             |       |      |      |                 |
| Sheet no1 of _9 sheets attached to Schedule of  |          |             |   |             | ubt   |      |      | 4,879.48        |
| Creditors Holding Unsecured Nonpriority Claims  |          |             | (7  | Total of th | nis į | pag  | ge)  | 7,57.5.46       |

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| In re | Patrick King, | Case No. |
|-------|---------------|----------|
| _     | Mary Ann King |          |

| CREDITOR'S NAME,   | COD      |             | sband, Wife, Joint, or Community             | C<br>O<br>N<br>T | U<br>N       | D<br>I<br>S |                 |
|--|----------|-------------|--|------------------|--------------|-------------|-----------------|
| AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODEBTOR | C<br>A<br>M |  | TINGEN           | UNLIQUIDATED | SPUTED      | AMOUNT OF CLAIM |
| Account No.  |          |             | United Recovery Systems                      | Ť                | Ť            |             |                 |
| Representing:  |          |             | Incorporated                                 |                  | D            |             |                 |
| Capital One Bank   |          |             | 5800 North Course Drive<br>Houston, TX 77072 |                  |              |             |                 |
| Account No. 4862-3671-3259-0623  |          |             | 2006 & prior years Periodic Purchases        |                  |              |             |                 |
| Capital One Bank   |          |             | renoulc Fulchases                            |                  |              |             |                 |
| P.O. Box 30285   |          | Н           |  |                  |              |             |                 |
| Salt Lake City, UT 84130-0285  |          |             |  |                  |              |             |                 |
|  |          |             |  |                  |              |             | 494.41          |
| Account No. 0526500767   |          |             | 2005   |                  |              |             |                 |
| Children's Memorial Hospital   |          |             | Services                                     |                  |              |             |                 |
| 2300 Chirldren's Plaza   |          | w           |  |                  |              |             |                 |
| Chicago, IL 60614  |          |             |  |                  |              |             |                 |
|  |          |             |  |                  |              |             | 362.19          |
| Account No.  |          |             | Medical Recovery Specialists, Inc.           |                  |              |             |                 |
| Representing:  |          |             | 2350 East Devon Avenue<br>Suite 352          |                  |              |             |                 |
| Children's Memorial Hospital   |          |             | Des Plaines, IL 60018                        |                  |              |             |                 |
|  |          |             |  |                  |              |             |                 |
|  |          |             |  |                  |              |             |                 |
| Account No. 3047754060   |          |             | 2006   |                  |              |             |                 |
| E.I  |          |             | Services                                     |                  |              |             |                 |
| ComEd Bill Payment Center  |          | Н           |  |                  |              |             |                 |
| Chicago, II 60668-0002   |          |             |  |                  |              |             |                 |
|  |          |             |  |                  |              |             |                 |
|  |          |             |  |                  |              |             | 943.38          |
| Sheet no. <b>2</b> of <b>9</b> sheets attached to Schedule of                        |          |             |  | Sub              |              |             | 1,799.98        |
| Creditors Holding Unsecured Nonpriority Claims                                       |          |             | (Total of t                                  | his              | pag          | ge)         | 1,7,00.50       |

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| In re | Patrick King, | Case No. |  |
|-------|---------------|----------|--|
| _     | Mary Ann King |          |  |

|   | С        | Hu               | sband, Wife, Joint, or Community   | Тс        | Τυ          | Б               |                 |
|---|----------|------------------|--|-----------|-------------|-----------------|-----------------|
| CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)             | CODEBTOR | H<br>W<br>J<br>C | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM. IF CLAIM<br>IS SUBJECT TO SETOFF, SO STATE.  | CONTINGEN | NLIQUIDATED | D I S P U T E D | AMOUNT OF CLAIM |
| Account No. 67348   |          |                  | 2006   | ٦т        | T<br>E      |                 |                 |
| Diagnostic Imaging Assoc.<br>PO Box 68<br>Northbrook, IL 60065-0068   |          | w                | Services   |           | D           |                 | 95.00           |
| Account No.   |          |                  | 6011 0079 2003 0011  | +         | +           | H               |                 |
| Discover Bank<br>P.O. Box 30943<br>Salt Lake City, UT 84130   |          | w                | Periodic Purchases   |           |             |                 |                 |
|   |          |                  |  |           |             |                 | 9,047.29        |
| Account No.  Representing: Discover Bank  |          |                  | Baker, Miller, Markoff & Krasny, LLC<br>29 North Wacker Drive<br>5th Floor<br>Chicago, IL 60606-3221 |           |             |                 |                 |
| Account No. <b>24 050870330</b>   |          |                  | Purchases  |           |             |                 |                 |
| Dominion Retail<br>c/o CBCS<br>236 East Town Street<br>PO Box 1838<br>Columbus, OH 43215                          |          | н                |  |           |             |                 | 273.67          |
| Account No.   |          |                  | 2006   | $\dagger$ | t           | t               |                 |
| Endodontic Assoc. of Park Ridge, Ltd.<br>c/o Mages & Price<br>102 Wilmot Road<br>Suite 410<br>Deerfield, IL 60015 |          | w                | Services   |           |             |                 | 161.59          |
| Sheet no. <b>3</b> of <b>9</b> sheets attached to Schedule of   |          |                  |  | Sub       | tota        | ıl<br>al        |                 |
| Creditors Holding Unsecured Nonpriority Claims  |          |                  | (Total of  |           |             |                 | 9,577.55        |

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Official Form 6F (10/06) - Cont.

| In re | Patrick King, | Case No. |
|-------|---------------|----------|
| _     | Mary Ann King |          |

| CREDITOR'S NAME,   | C        | Ηι          | sband, Wife, Joint, or Community  | S      | U     | P       |                   |
|--|----------|-------------|-----------------------------------|--------|-------|---------|-------------------|
| AND MAILING ADDRESS<br>INCLUDING ZIP CODE,<br>AND ACCOUNT NUMBER | CODEBTOR | H<br>W<br>J | CONSIDERATION FOR CLAIM. IF CLAIM | CONFIN | LLQU  | DISPUTE | AMOUNT OF CLAIM   |
| (See instructions above.)  | O<br>R   | С           | IS SUBJECT TO SETOFF, SO STATE.   | NGEN   | Ď     | E<br>D  | ANNOCIVI OF CLASS |
| Account No. 66 7833374   |          |             | 2006                              | T T    | DATED |         |                   |
|  |          |             | Services                          |        | D     |         |                   |
| ENH Medical Group Specialty Practice                             |          |             |                                   |        |       |         |                   |
| 23139 Network Place  |          | W           |                                   |        |       |         |                   |
| Chicago, IL 60673-1231   |          |             |                                   |        |       |         |                   |
|  |          |             |                                   |        |       |         | 17.79             |
| Account No. 2016205986109  |          | T           | 2006                              |        | T     |         |                   |
|  |          |             | Services                          |        |       |         |                   |
| Evanston Northwestern Healthcare                                 |          |             |                                   |        |       |         |                   |
| 23056 Network Place  |          | W           |                                   |        |       |         |                   |
| Chicago, IL 60673-1230   |          |             |                                   |        |       |         |                   |
|  |          |             |                                   |        |       |         | 193.00            |
| Account No.  |          |             | Van Ru Credit Corporation         |        |       |         |                   |
|  |          |             | 1350 East Touhy Avenue            |        |       |         |                   |
| Representing:  |          |             | Suite 100E                        |        |       |         |                   |
| Evanston Northwestern Healthcare                                 |          |             | Des Plaines, IL 60018-3307        |        |       |         |                   |
|  |          |             |                                   |        |       |         |                   |
|  |          |             |                                   |        |       |         |                   |
| Account No. <b>5178-0075-0117-5137</b>                           |          |             | 2006 & prior years                |        |       |         |                   |
|  |          |             | Periodic Purchases                |        |       |         |                   |
| First Premier Bank   |          |             |                                   |        |       |         |                   |
| P.O. Box 5524  |          | W           |                                   |        |       |         |                   |
| Sioux Falls, SD 57117-5524                                       |          |             |                                   |        |       |         |                   |
|  |          |             |                                   |        |       |         | 237.55            |
| -  |          |             |                                   |        |       |         | 237.33            |
| Account No.  |          |             | 2006<br>Services                  |        |       |         |                   |
| Golf Diag Image  |          |             | OGI VICES                         |        |       |         |                   |
| c/o ACC International  |          | Н           |                                   |        |       |         |                   |
| 919 Estes Court  |          |             |                                   |        |       |         |                   |
| Schaumburg, IL 60193-4427  |          |             |                                   |        |       |         |                   |
|  |          |             |                                   |        |       |         | 409.15            |
| Sheet no. 4 of 9 sheets attached to Schedule of                  |          | _           |                                   | Sub    | tota  | ıl      | 057.40            |
| Creditors Holding Unsecured Nonpriority Claims                   |          |             | (Total of t                       | his    | pag   | ge)     | 857.49            |

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| In re | Patrick King, | Case No |
|-------|---------------|---------|
|       | Mary Ann King |         |

|   | С        | Hu  | sband, Wife, Joint, or Community  | Тс        | Īυ         | Гр       |                 |
|---|----------|-----|---|-----------|------------|----------|-----------------|
| CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODEBTOR | C H | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | COXFLXGEX | UNLIQUIDAT | T<br>F   | AMOUNT OF CLAIM |
| Account No. 3862  |          |     | 2006  | Т         | E<br>D     |          |                 |
| Golf-Western Surgical Specialists<br>8901 Golf Road<br>Suite 305<br>Des Plaines, IL 60016-4029        |          | w   | Services  |           |            |          | 111.39          |
| Account No. R32492  | 1        |     | 2006  | +         |            |          |                 |
| IL Bone & Joint Institute<br>135 South LaSalle<br>Dept 1052<br>Chicago, IL 60674-1052                 |          | w   | Services  |           |            |          | 51.85           |
| Account No. 1404948   |          |     | 2006  | +         |            |          |                 |
| Life Watch Holding Corp.<br>PO Box 24475<br>Cleveland, OH 44124                                       |          | w   | Services  |           |            |          | 45.75           |
| Account No. <b>003 35846</b>  | 1        |     | 2006  | +         | <u> </u>   |          |                 |
| MEA Elk Grove LLC<br>PO Box 366<br>Hinsdale, IL 60522   | -        | w   | Services  |           |            |          | 25.83           |
| Account No. 3 15219023 01 01  | -        |     | 2006  | +         | -          |          | 25.03           |
| MEA Medical Care Centers Dept. 4043 PO Box 3594 Oak Brook, IL 60522                                   |          | н   | Services  |           |            |          | 88.00           |
| Sheet no. <b>5</b> of <b>9</b> sheets attached to Schedule of   |          |     |   | Sub       | tota       | <u> </u> |                 |
| Creditors Holding Unsecured Nonpriority Claims  |          |     | (Total of   |           |            |          | 322.82          |

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| In re | Patrick King, | Case No. |
|-------|---------------|----------|
|       | Mary Ann King |          |

| CDEDITIONIC NAME  | С        | Hu          | sband, Wife, Joint, or Community  | С        | U           | D         |                 |
|---|----------|-------------|---|----------|-------------|-----------|-----------------|
| CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODEBTOR | C<br>H<br>M | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | ONTINGEN | - 1 ()      | DISPUTED  | AMOUNT OF CLAIM |
| Account No. 1081138301  |          |             | 2006  | ٦ï       | T<br>E<br>D |           |                 |
| MEA Medical Care Centers, LLC<br>Dept 20-6007<br>PO Box 5990<br>Carol Stream, IL 60197                |          | J           | Services  |          | D           |           | 94.30           |
| Account No.   | +        |             | Services  | +        | <u> </u>    |           |                 |
| Midwest Diagnostic Pathology SC<br>75 Remittance Drive<br>Suite 3070<br>Chicago, IL 60675-3070        |          | w           |   |          |             |           | 29.42           |
| Account No.   | 1        |             | OSI Collection Services, Inc.   |          |             | $\dagger$ |                 |
| Representing:<br>Midwest Diagnostic Pathology SC  |          |             | P.O. Box 959<br>Brookfield, WI 53008-0959   |          |             |           |                 |
| Account No. 19450   |          |             | 2007  | +        | +           | +         |                 |
| Neurolgy Specialists of Northern IL<br>PO Box 2823<br>Carol Stream, IL 60132-0001                     |          | w           | Services  |          |             |           | 40.20           |
| Account No. <b>51 71 26 0000 9</b>  |          |             | 2006  |          | +           |           | 10.20           |
| Nicor Gas<br>P.O. Box 416<br>Aurora, IL 60568-0001  |          | н           | Services  |          |             |           |                 |
|   |          |             |   |          |             |           | 785.10          |
| Sheet no. 6 of 9 sheets attached to Schedule o  | f        |             |   | Sub      | tot:        | al        | 919.02          |

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| In re | Patrick King, | Case No. |
|-------|---------------|----------|
|       | Mary Ann King |          |

| CREDITOR'S NAME,   |                 | Hu          | sband, Wife, Joint, or Community  |                   |    | U          | D   |                 |
|--|-----------------|-------------|---|-------------------|----|------------|-----|-----------------|
| AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)                 | C O D E B T O R | C<br>A<br>M | DATE CLAIM WAS INCURRED AN<br>CONSIDERATION FOR CLAIM. IF CLA<br>IS SUBJECT TO SETOFF, SO STATE | MM                | IJ | UNU COLLAC | Ϋ́Ι | AMOUNT OF CLAIM |
| Account No. 11436  |                 | T           | 2005  |                   | T  | Î          |     |                 |
| Pain Care Consultants, SC<br>185 Penny Avenue<br>Dundee, IL 60118                                    |                 | w           | Services  |                   |    | E<br>D     |     |                 |
| Account No.  |                 |             | 2006<br>Services  |                   |    |            |     | 6.60            |
| Park Ridge Anesthesiology<br>PO Box 1123<br>Jackson, MI 49204-1123                                   |                 | w           |   |                   |    |            |     |                 |
|  |                 |             |   |                   |    |            |     | 135.00          |
| Account No.  |                 |             | Medical Business Bureau, Inc.<br>P.O. Box 1219  |                   |    |            |     |                 |
| Representing:<br>Park Ridge Anesthesiology   |                 |             | Park Ridge, IL 60068-7219   |                   |    |            |     |                 |
| Account No. <b>186545</b>  | _               |             | 2005<br>Services  |                   |    |            |     |                 |
| Parkside Magnetic Resonance Center<br>1875 Dempster Street<br>Suite G06<br>Park Ridge, IL 60068-1163 |                 | J           |   |                   |    |            |     |                 |
|  |                 |             |   |                   |    |            |     | 1,900.00        |
| Account No.  Representing:   | -               |             | NCO Financial Systems, Inc. P.O. Box 15630 Dept 99 Wilmington, DE 19850                         |                   |    |            |     |                 |
| Parkside Magnetic Resonance Center   |                 |             | willington, DE 19650  |                   |    |            |     |                 |
| Sheet no7 of _9 sheets attached to Schedule<br>Creditors Holding Unsecured Nonpriority Claims        | of              |             | /T  | Su<br>otal of thi |    | otal       | - 1 | 2,041.60        |

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| In re | Patrick King, | Case No. |
|-------|---------------|----------|
| _     | Mary Ann King |          |

| CREDITOR'S NAME,  | Ç               | Hu          | sband, Wife, Joint, or Community  | Ç         | U                     | D               |                 |
|---|-----------------|-------------|---|-----------|-----------------------|-----------------|-----------------|
| AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)                        | C O D E B T O R | C<br>A<br>H | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM. IF CLAIM<br>IS SUBJECT TO SETOFF, SO STATE. | CONTINGEN | UNLIQUIDA             | D I S P U T E D | AMOUNT OF CLAIM |
| Account No. 3941878421  |                 |             | 2006  | T         | D<br>A<br>T<br>E<br>D |                 |                 |
| Quest Diagnostics Incorporated<br>P.O. Box 64804<br>Baltimore, MD 21264-4804                                |                 | w           | Services  |           | D                     |                 | 63.55           |
| Account No. <b>0636400006</b>   |                 |             | 2006  |           | -                     |                 | 03.33           |
| Resurrection Medical Center<br>7435 West Talcott Avenue<br>Chicago, IL 60631                                |                 | J           | Services  |           |                       |                 |                 |
|   |                 |             |   |           |                       |                 | 192.03          |
| Account No. 031 1 0000051621  RMC Emergency Physicians 520 East 22nd Street Lombard, IL 60148               |                 | w           | 2006<br>Services  |           |                       |                 | 12.30           |
| Account No. 4352-3767-1532-5734   | 1               |             | 2006 & prior years  | +         |                       |                 |                 |
| Target National Bank<br>PO Box 59317<br>Minneapolis, MN 55459-0317  |                 | J           | Periodic Purchases  |           |                       |                 | 205 70          |
| Account No.   | +               |             | 2005  |           | -                     |                 | 985.76          |
| The Ear, Nose & Throat Center<br>1875 Dempster Street<br>Suite 301<br>Park Ridge, IL 60068                  |                 | w           | Services  |           |                       |                 |                 |
|   |                 |             |   |           |                       |                 | 349.00          |
| Sheet no. <b>8</b> of <b>9</b> sheets attached to Schedule o Creditors Holding Unsecured Nonpriority Claims | f               |             | (Total of   | Sub       |                       |                 | 1,602.64        |

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| In re | Patrick King, | Case No. |
|-------|---------------|----------|
|       | Mary Ann King |          |

|  |              |       |   |            |             |          | •               |
|--|--------------|-------|---|------------|-------------|----------|-----------------|
| CREDITOR'S NAME,   | CO           | Hu    | sband, Wife, Joint, or Community  | 6          | U<br>N      | P        |                 |
| AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODEBTOR     | A A C | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM. IF CLAIM<br>IS SUBJECT TO SETOFF, SO STATE. | CONTINGENT | L I QU I DA | DISPUTED | AMOUNT OF CLAIM |
| Account No.  |              |       | Armor Systems Corporation   | Т          | T           |          |                 |
| Representing:  | 1            |       | 1700 Kiefer Drive   |            | D           |          | _               |
| The Ear, Nose & Throat Center  |              |       | Suite 1   |            |             |          |                 |
|  |              |       | Zion, IL 60099-5105   |            |             |          |                 |
|  |              |       |   |            |             |          |                 |
|  |              |       |   |            |             |          |                 |
|  |              |       |   |            |             |          |                 |
| Account No.  |              |       |   |            |             |          |                 |
|  | 1            |       |   |            |             |          |                 |
|  |              |       |   |            |             |          |                 |
|  |              |       |   |            |             |          |                 |
|  |              |       |   |            |             |          |                 |
|  |              |       |   |            |             |          |                 |
|  | _            |       |   |            |             |          |                 |
| Account No.  | 1            |       |   |            |             |          |                 |
|  |              |       |   |            |             |          |                 |
|  |              |       |   |            |             |          |                 |
|  |              |       |   |            |             |          |                 |
|  |              |       |   |            |             |          |                 |
|  |              |       |   |            |             |          |                 |
|  | -            |       |   | ₩          | _           | _        |                 |
| Account No.  | 4            |       |   |            |             |          |                 |
|  |              |       |   |            |             |          |                 |
|  |              |       |   |            |             |          |                 |
|  |              |       |   |            |             |          |                 |
|  |              |       |   |            |             |          |                 |
|  |              |       |   |            |             |          |                 |
| Account No.  | ╁            |       |   | $\vdash$   | $\vdash$    | -        |                 |
| Account IVO.   | $\mathbf{I}$ |       |   |            |             |          |                 |
|  |              |       |   |            |             |          |                 |
|  |              |       |   |            |             |          |                 |
|  |              |       |   |            |             |          |                 |
|  |              |       |   |            |             |          |                 |
|  |              |       |   |            |             |          |                 |
| Sheet no. <b>9</b> of <b>9</b> sheets attached to Schedule of                        |              | _     | 1   | Subt       | tots        | 1        |                 |
| Creditors Holding Unsecured Nonpriority Claims (Total                                |              |       |   |            |             | 0.00     |                 |
| Crossions from Consecuted Fromphority Claims   |              |       | (Total of t   |            |             |          |                 |
|  |              |       | <b>7</b>  |            | ota         |          | 25,789.90       |
|  |              |       | (Report on Summary of So  | hec        | iule        | es)      | 23,763.90       |

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Form B6G (10/05)

| In re | Patrick King, | Case No. |
|-------|---------------|----------|
|       | Mary Ann King |          |

Debtors

## SCHEDULE G. EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. § 112; Fed.R. Bankr. P. 1007(m).

☐ Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract.

Mike Mohar 1230 South Grove Park Ridge, IL **Residential Lease** 

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Form B6H (10/05)

| In re | Patrick King, | Case No. |
|-------|---------------|----------|
|       | Mary Ann King |          |

Debtors

### SCHEDULE H. CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. § 112; Fed. Bankr. P. 1007(m).

Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR

NAME AND ADDRESS OF CREDITOR

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Official Form 6I (10/06)

|       | Patrick King  |           |          |  |
|-------|---------------|-----------|----------|--|
| In re | Mary Ann King |           | Case No. |  |
|       |               | Debtor(s) | =        |  |

## SCHEDULE I. CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by every married debtor, whether or not a joint petition is

| filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child.  Debtor's Marital Status:  DEPENDENTS OF DEBTOR AND SPOUSE |  |                     |                |                         |            |                  |
|---|--|---------------------|----------------|-------------------------|------------|------------------|
| Married   | RELATIONSHIP(S): Son Daughter Daughter   | AC                  | 14 y           | rears<br>rears<br>rears |            |                  |
| <b>Employment:</b>  | DEBTOR   |                     |                | SPOUSE                  |            |                  |
| Occupation  | Manager  | Teacher             |                |                         |            |                  |
| Name of Employer  | Thomas Tile & Carpet   | St. Thecl           | a Paris        | sh                      |            |                  |
| How long employed   | Since 3/18/07  | 1 year              |                |                         |            |                  |
| Address of Employer   | 645 West Lake Street<br>Addison, IL 60101                                      | 6725 We<br>Park Rid | ge, IL         | 60068                   |            |                  |
|   | ge or projected monthly income at time case filed)                             |                     |                | DEBTOR                  |            | SPOUSE           |
|   | , and commissions (Prorate if not paid monthly)                                |                     | \$             | 3,600.00                | \$_        | 2,585.00         |
| 2. Estimate monthly overtime  |  |                     | \$             | 0.00                    | \$_        | 0.00             |
| 3. SUBTOTAL   |  |                     | \$             | 3,600.00                | \$_        | 2,585.00         |
| 4. LESS PAYROLL DEDUCT  |  |                     | Ф.             | 729.20                  | · ·        | 215.62           |
| <ul><li>a. Payroll taxes and social</li><li>b. Insurance</li></ul>  | security   |                     | \$ <u></u>     | 728.20                  | ф –        | 315.62<br>460.60 |
| c. Union dues   |  |                     | \$ <u></u>     | 0.00                    | φ –        | 0.00             |
|   |  |                     | \$ <u> </u>    | 0.00                    | φ_         | 0.00             |
| d. Other (Specify):   |  |                     | \$<br>         | 0.00                    | \$ _<br>\$ | 0.00             |
| 5. SUBTOTAL OF PAYROLI  | DEDUCTIONS   |                     | \$             | 728.20                  | \$_        | 776.22           |
| 6. TOTAL NET MONTHLY T  | TAKE HOME PAY  |                     | \$             | 2,871.80                | \$_        | 1,808.78         |
|   | ion of business or profession or farm (Attach detailed                         | statement)          | \$             | 0.00                    | \$_        | 0.00             |
| 8. Income from real property  |  |                     | \$             | 0.00                    | \$_        | 0.00             |
| 9. Interest and dividends   | upport payments payable to the debtor for the debt                             | or's use or         | \$             | 0.00                    | \$_        | 0.00             |
| that of dependents listed al<br>11. Social security or government   | bove   | or s use or         | \$             | 0.00                    | \$_        | 0.00             |
| (C:f).  |  |                     | \$             | 0.00                    | \$         | 0.00             |
| (Specify).  |  |                     | \$             | 0.00                    | \$ -       | 0.00             |
| 12. Pension or retirement incor   | ne   |                     | \$ <del></del> | 0.00                    | \$ -       | 0.00             |
| 13. Other monthly income  |  |                     | Ψ              | 0.00                    | Ψ_         | 0.00             |
| (Specify):  |  |                     | \$             | 0.00                    | \$         | 0.00             |
|   |  |                     | \$             | 0.00                    | \$         | 0.00             |
| 14. SUBTOTAL OF LINES 7   | THROUGH 13   |                     | \$             | 0.00                    | \$_        | 0.00             |
| 15. AVERAGE MONTHLY IN  | NCOME (Add amounts shown on lines 6 and 14)                                    |                     | \$             | 2,871.80                | \$_        | 1,808.78         |
|   | MONTHLY INCOME: (Combine column totals ebtor repeat total reported on line 15) |                     |                | \$                      | 4,680      | ).58             |

(Report also on Summary of Schedules and, if applicable, on Statistical Summary of Certain Liabilities and Related Data)

17. Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document:

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Official Form 6J (10/06)

| In re | Patrick King<br>Mary Ann King | Ca        | se No. |
|-------|-------------------------------|-----------|--------|
|       |                               | Debtor(s) |        |

# SCHEDULE J. CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)

| SCHEDULE J. CURRENT EXPENDITURES OF INDIVIDUAL   | LDEDI          | OK(5)             |
|--|----------------|-------------------|
| Complete this schedule by estimating the average or projected monthly expenses of the debtor and the filed. Prorate any payments made bi-weekly, quarterly, semi-annually, or annually to show monthly rate. | e debtor's fa  | mily at time case |
| ☐ Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Complexpenditures labeled "Spouse."  | ete a separato | e schedule of     |
| 1. Rent or home mortgage payment (include lot rented for mobile home)  | \$             | 1,750.00          |
| a. Are real estate taxes included? Yes No _X   | · ——           | ·                 |
| b. Is property insurance included? Yes No _X   |                |                   |
| 2. Utilities: a. Electricity and heating fuel  | \$             | 350.00            |
| b. Water and sewer   | \$             | 35.00             |
| c. Telephone   | \$             | 245.00            |
| d. Other Cable   | \$             | 85.00             |
| 3. Home maintenance (repairs and upkeep)   | \$             | 0.00              |
| 4. Food  | \$             | 600.00            |
| 5. Clothing  | \$             | 110.00            |
| 6. Laundry and dry cleaning  | \$             | 15.00             |
| 7. Medical and dental expenses   | \$             | 300.00            |
| 8. Transportation (not including car payments)   | \$             | 215.00            |
| 9. Recreation, clubs and entertainment, newspapers, magazines, etc.  | \$             | 60.00             |
| 10. Charitable contributions   | \$             | 80.00             |
| 11. Insurance (not deducted from wages or included in home mortgage payments)  |                |                   |
| a. Homeowner's or renter's   | \$             | 55.00             |
| b. Life  | \$             | 140.00            |
| c. Health  | \$             | 0.00              |
| d. Auto  | \$             | 180.00            |
| e. Other  12. Taxes (not deducted from wages or included in home mortgage payments)  | \$             | 0.00              |
|  |                |                   |
| (Specify)  | \$             | 0.00              |
| (Specify)  13. Installment payments: (In chapter 11, 12, and 13 cases, do not list payments to be included in the plan)  |                |                   |
| a. Auto  | \$             | 306.00            |
| b. Other   | \$             | 0.00              |
| c. Other   | \$             | 0.00              |
| d. Other   | \$             | 0.00              |
| 14. Alimony, maintenance, and support paid to others   | \$             | 0.00              |
| 15. Payments for support of additional dependents not living at your home  | \$             | 0.00              |
| 16. Regular expenses from operation of business, profession, or farm (attach detailed statement)   | \$             | 0.00              |
| 17. Other Haricuts & Sundries  | \$             | 150.00            |
| Other  | \$             | 0.00              |
| 18. AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)                                 | \$             | 4,676.00          |
| 19. Describe any increase or decrease in expenditures reasonably anticipated to occur within the year following the filing of this document:   | _              |                   |
| 20. STATEMENT OF MONTHLY NET INCOME  |                |                   |
| a. Average monthly income from Line 15 of Schedule I   | \$             | 4,680.58          |
| b. Average monthly expenses from Line 18 above   | \$             | 4,676.00          |
| c. Monthly net income (a. minus b.)  | \$             | 4.58              |

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Official Form 6-Declaration. (10/06)

# **United States Bankruptcy Court Northern District of Illinois**

| In re | Patrick King<br>Mary Ann King |           | Case No. |   |
|-------|-------------------------------|-----------|----------|---|
|       |                               | Debtor(s) | Chapter  | 7 |
|       |                               |           |          |   |
|       |                               |           |          |   |
|       |                               |           |          |   |

### DECLARATION CONCERNING DEBTOR'S SCHEDULES

### DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of <a href="24">24</a> sheets [total shown on summary page plus 2], and that they are true and correct to the best of my knowledge, information, and belief.

| Date | June 27, 2007 | Signature | /s/ Patrick King Patrick King Debtor         |
|------|---------------|-----------|--|
| Date | June 27, 2007 | Signature | /s/ Mary Ann King Mary Ann King Joint Debtor |

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

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Official Form 7 (04/07)

# **United States Bankruptcy Court Northern District of Illinois**

|       | Patrick King  |           |          |   |
|-------|---------------|-----------|----------|---|
| In re | Mary Ann King |           | Case No. |   |
|       |               | Debtor(s) | Chapter  | 7 |
|       |               |           | _        |   |

#### STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. Do not include the name or address of a minor child in this statement. Indicate payments, transfers and the like to minor children by stating "a minor child." See 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

#### **DEFINITIONS**

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any owner of 5 percent or more of the voting or equity securities of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. 11 U.S.C. § 101.

#### 1. Income from employment or operation of business

None

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE \$67,924.00 2005: Wages \$55,116.00 2006: Wages \$0.00 2007: Wages

#### 2. Income other than from employment or operation of business

None

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the two years immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

**AMOUNT** SOURCE

2005: Interest \$6,069, Capital Gain \$531, Pension \$77 \$6.677.00 \$25,227.00 2006: Interest \$24,585, Capital Gain \$365, Pension \$277

#### 3. Payments to creditors

None

Complete a. or b., as appropriate, and c.

a. Individual or joint debtor(s) with primarily consumer debts. List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within 90 days immediately preceding the commencement of this case if the aggregate value of all property that constitutes or is affected by such transfer is not less than \$600. Indicate with an (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and creditor counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS DATES OF AMOUNT STILL OF CREDITOR **PAYMENTS** AMOUNT PAID OWING

None

b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within 90 days immediately preceding the commencement of the case if the aggregate value of all property that constitutes or is affected by such transfer is not less than \$5,475. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

> AMOUNT DATES OF PAID OR PAYMENTS/ VALUE OF AMOUNT STILL **TRANSFERS TRANSFERS OWING**

NAME AND ADDRESS OF CREDITOR

c. All debtors: List all payments made within one year immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR

DATE OF PAYMENT

AMOUNT PAID **OWING** 

4. Suits and administrative proceedings, executions, garnishments and attachments

None П

None

a. List all suits and administrative proceedings to which the debtor is or was a party within one year immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT COURT OR AGENCY STATUS OR NATURE OF PROCEEDING AND CASE NUMBER AND LOCATION DISPOSITION Circuit Court of Cook County, Capital One Bank v. Mary A. Pending Contract King, case no. 07 M1 119004 Chicago, Illinois

Discover Bank v. Mary Ann Circuit Court of Cook County, Contract Pending

King, case no. 07 M1 106067 Chicago, Illinois AMOUNT STILL

2

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None

b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED

DATE OF SEIZURE

DESCRIPTION AND VALUE OF PROPERTY

#### 5. Repossessions, foreclosures and returns

None

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER DATE OF REPOSSESSION,
FORECLOSURE SALE,
TRANSFER OR RETURN
DESCRIPTION AND VALUE OF
PROPERTY

#### 6. Assignments and receiverships

None

a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DATE OF

NAME AND ADDRESS OF ASSIGNEE

ASSIGNMENT

TERMS OF ASSIGNMENT OR SETTLEMENT

None

b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND LOCATION

NAME AND ADDRESS OF CUSTODIAN OF COURT CASE TITLE & NUMBER

DATE OF ORDER DESCRIPTION AND VALUE OF

3

PROPERTY

#### 7. Gifts

None

List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION

RELATIONSHIP TO DEBTOR, IF ANY

DATE OF GIFT

DESCRIPTION AND VALUE OF GIFT

#### 8. Losses

None

List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case.** (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY

DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS

DATE OF LOSS

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#### 9. Payments related to debt counseling or bankruptcy

None

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE Gregory K. Stern, P.C. 53 West Jackson Boulevard Suite 1442 Chicago, IL 60604 DATE OF PAYMENT, NAME OF PAYOR IF OTHER THAN DEBTOR 4/07 - 6/07 AMOUNT OF MONEY
OR DESCRIPTION AND VALUE
OF PROPERTY
\$600.00

4

#### 10. Other transfers

None

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR Richard M. Kimball 1431 South Birch Mount Prospect, IL 60056 Unrelated DESCRIBE PROPERTY TRANSFERRED
AND VALUE RECEIVED
9/5/06 1431 South Birch sold for \$290,000.00 (\$4,229.48)

cash proceeds to Debtors)

None b. List all property transferred by the debtor within **ten years** immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER DEVICE

DATE(S) OF TRANSFER(S) AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST

R(S) IN PROPERTY

#### 11. Closed financial accounts

None

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION

TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE

AMOUNT AND DATE OF SALE OR CLOSING

#### 12. Safe deposit boxes

None

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY

DESCRIPTION OF CONTENTS

DATE OF TRANSFER OR SURRENDER, IF ANY 13. Setoffs

None

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATE OF SETOFF

AMOUNT OF SETOFF

5

#### 14. Property held for another person

None List all property owned by another person that the debtor holds or controls.

DESCRIPTION AND VALUE OF

NAME AND ADDRESS OF OWNER

PROPERTY

LOCATION OF PROPERTY

#### 15. Prior address of debtor

None

If the debtor has moved within **three years** immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS 1431 South Birch, Mount Prospect, Illinois NAME USED Debtors DATES OF OCCUPANCY 9/5/06 & prior years

#### 16. Spouses and Former Spouses

None

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within **eight years** immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

#### 17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

SITE NAME AND ADDRESS

NAME AND ADDRESS OF

DATE OF

ENVIRONMENTAL

GOVERNMENTAL UNIT

NOTICE

LAW

None b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

NAME AND ADDRESS OF

DATE OF

ENVIRONMENTAL

SITE NAME AND ADDRESS

GOVERNMENTAL UNIT

NOTICE

LAW

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None

c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS OF **GOVERNMENTAL UNIT** 

DOCKET NUMBER

STATUS OR DISPOSITION

#### 18. Nature, location and name of business

None

a. If the debtor is an individual, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within six years immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

> LAST FOUR DIGITS OF SOC. SEC. NO./ COMPLETE EIN OR OTHER TAXPAYER

**ADDRESS** I.D. NO.

**BEGINNING AND** NATURE OF BUSINESS

**ENDING DATES** 

None

NAME

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

**ADDRESS** NAME

### DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

| Date | June 27, 2007 | Signature | /s/ Patrick King  |  |
|------|---------------|-----------|-------------------|--|
|      |               |           | Patrick King      |  |
|      |               |           | Debtor            |  |
| Date | June 27, 2007 | Signature | /s/ Mary Ann King |  |
|      | <u> </u>      |           | Mary Ann King     |  |
|      |               |           | Joint Debtor      |  |

 $Penalty\ for\ making\ a\ false\ statement:\ Fine\ of\ up\ to\ \$500,000\ or\ imprisonment\ for\ up\ to\ 5\ years,\ or\ both.\ 18\ U.S.C.\ \S\$\ 152\ and\ 3571$ 

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Form 8 (10/05)

## **United States Bankruptcy Court** Northern District of Illinois

|                                   | Patrick King<br>Mary Ann King        |                                 |   | Case No.                      |   |  |
|-----------------------------------|--------------------------------------|---------------------------------|---|-------------------------------|---|--|
| mrc <u></u>                       | Debtor(s)                            |                                 | Debtor(s)   | Chapter                       | 7   |  |
|                                   | CHAPTER 7 IN                         | DIVIDUAL DEBTO                  | OR'S STATEME  | NT OF INT                     | <b>TENTION</b>  |  |
| ■ I ha                            | ve filed a schedule of assets and li | abilities which includes debt   | s secured by property o                                   | f the estate.                 |   |  |
| □ I ha                            | ve filed a schedule of executory c   | ontracts and unexpired leases   | s which includes person                                   | al property subj              | ect to an unexpire                                    | ed lease.  |
| ■ I int                           | tend to do the following with resp   | ect to property of the estate w | which secures those deb                                   | ts or is subject to           | o a lease:  |  |
| Description                       | of Secured Property                  | Creditor's Name                 | Property will be<br>Surrendered                           | Property is claimed as exempt | Property will be redeemed pursuant to 11 U.S.C. § 722 | Debt will be reaffirmed pursuant to 11 U.S.C. § 524(c) |
| 2006 For                          | 1 2                                  | Ford Credit                     |   | <b>,</b> .                    |   | X  |
| Description<br>Property<br>-NONE- | of Leased                            | Lessor's Name                   | Lease will be assumed pursuan to 11 U.S.C. § 362(h)(1)(A) | t                             |   |  |
| Date Ju                           | ne 27, 2007                          | Signature                       | /s/ Patrick King Patrick King Debtor                      |                               | _   |  |
| Date Ju                           | ne 27, 2007                          | Signature                       | /s/ Mary Ann King<br>Mary Ann King<br>Joint Debtor        |                               |   |  |

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|  | istrict of Illinois |  |
|--|---------------------|--|
|  |                     |  |

|      | Patrick King  |  | G. N                    |                                    |  |  |
|------|---|--|-------------------------|------------------------------------|--|--|
| In r | re Mary Ann King  | Debtor(s)  | Case No<br>Chapter      |                                    |  |  |
|      |   |  | _                       |                                    |  |  |
|      | DISCLOSUR   | E OF COMPENSATION OF ATTO  | ORNEY FOR I             | DEBTOR(S)                          |  |  |
| 1.   | compensation paid to me within or   | rursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016(b), I certify that I am the attorney for the above-named debtor and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to e rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows: |                         |                                    |  |  |
|      | For legal services, I have agree  | ed to accept   | \$                      | 1,700.00                           |  |  |
|      | Prior to the filing of this stater  | nent I have received   | \$                      | 600.00                             |  |  |
|      | Balance Due   |  | \$                      | 1,100.00                           |  |  |
| 2.   | The source of the compensation par  | d to me was:   |                         |                                    |  |  |
|      | ■ Debtor □ Other (  | specify):  |                         |                                    |  |  |
| 3.   | The source of compensation to be p  | paid to me is:   |                         |                                    |  |  |
|      | ■ Debtor □ Other (  | specify):  |                         |                                    |  |  |
| 4.   | 4. I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law fir   |  |                         |                                    |  |  |
|      |   | e-disclosed compensation with a person or person<br>r with a list of the names of the people sharing in t  |                         |                                    |  |  |
| 5.   | In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:  a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;  b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;  c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;  d. [Other provisions as needed]  Negotiating, preparing and filing reaffirmation and redemption agreements with secured creditors, exemption planning, motions and applications as needed including motions to avoid judicial and non purchase money non possessory liens |  |                         |                                    |  |  |
| 6.   | Representation of debto   | e above-disclosed fee does not include the following or(s) in any motion to dismiss for abuse, dischang. Services rendered after entry of the disc   | nargability actions,    |                                    |  |  |
|      |   | CERTIFICATION  |                         |                                    |  |  |
| this | I certify that the foregoing is a combankruptcy proceeding.   | plete statement of any agreement or arrangement f  | For payment to me for   | representation of the debtor(s) in |  |  |
| Date | ed: June 27, 2007   | /s/ Gregory K. S   |                         |                                    |  |  |
|      |   | Gregory K. Stern   |                         |                                    |  |  |
|      |   | Gregory K. Steri<br>53 West Jackso   |                         |                                    |  |  |
|      |   | Suite 1442   |                         |                                    |  |  |
|      |   | Chicago, IL 606  | 04<br>Fax: (312) 427-12 | 100                                |  |  |
| 1    |   | (312) 427-1558   | Fax: (312) 427-12       | 'ለሃ                                |  |  |

# UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

# NOTICE TO INDIVIDUAL CONSUMER DEBTOR UNDER § 342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case. You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

#### 1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days <u>before</u> the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses.

### 2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

#### Chapter 7: Liquidation (\$245 filing fee, \$39 administrative fee, \$15 trustee surcharge: Total Fee \$299)

- 1. Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.
- 2. Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.
- 3. The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.
- 4. Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

## <u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$39 administrative fee: Total fee \$274)

- 1. Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.
- 2. Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.
- 3. After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

#### **B 201** (04/09/06)

#### **Chapter 11:** Reorganization (\$1000 filing fee, \$39 administrative fee: Total fee \$1039)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

#### **Chapter 12:** Family Farmer or Fisherman (\$200 filing fee, \$39 administrative fee: Total fee \$239)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

#### 3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

**WARNING:** Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

#### **Certificate of Attorney**

I hereby certify that I delivered to the debtor this notice required by § 342(b) of the Bankruptcy Code.

| Gregory K. Stern 6183380  | X _/s/ Gregory K. Stern            | June 27, 2007 |  |  |  |  |  |
|---|------------------------------------|---------------|--|--|--|--|--|
| Printed Name of Attorney  | Signature of Attorney              | Date          |  |  |  |  |  |
| Address:  |                                    |               |  |  |  |  |  |
| 53 West Jackson Boulevard   |                                    |               |  |  |  |  |  |
| Suite 1442  |                                    |               |  |  |  |  |  |
| Chicago, IL 60604   |                                    |               |  |  |  |  |  |
| (312) 427-1558  |                                    |               |  |  |  |  |  |
| Certificate of Debtor I (We), the debtor(s), affirm that I (we) have received and read this notice. |                                    |               |  |  |  |  |  |
| Patrick King  |                                    |               |  |  |  |  |  |
| Mary Ann King   | X /s/ Patrick King                 | June 27, 2007 |  |  |  |  |  |
| Printed Name of Debtor  | Signature of Debtor                | Date          |  |  |  |  |  |
| Case No. (if known)   | X /s/ Mary Ann King                | June 27, 2007 |  |  |  |  |  |
|   | Signature of Joint Debtor (if any) | Date          |  |  |  |  |  |

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## **United States Bankruptcy Court** Northern District of Illinois

| In re              | Patrick King<br>Mary Ann King           |   | Case No.         |                           |
|--------------------|---|---|------------------|---------------------------|
|                    |   | Debtor(s)                                   | Chapter          | 7                         |
|                    | •                                       | VERIFICATION OF CREDITOR M                  | <b>IATRIX</b>    |                           |
| Number of Creditor |   |   | f Creditors:     | 45                        |
|                    | The above-named Debtor (our) knowledge. | (s) hereby verifies that the list of credit | tors is true and | correct to the best of my |
| Date:              | June 27, 2007                           | /s/ Patrick King Patrick King               |                  |                           |
| Date:              | June 27, 2007                           | Signature of Debtor /s/ Mary Ann King       |                  |                           |
|                    |   | Mary Ann King<br>Signature of Debtor        |                  |                           |

Advanced Radiology Associates, SC c/o Illinois Collection Service, Inc. PO Box 646
Oak Lawn, IL 60454-0646

Advanced Radiology Consultants, SC 520 East 22nd Street Lombard, IL 60148

Advocate Medical Group PO Box 92523 Chicago, IL 60675-2523

Advocate-Lutheran General Hospital P.O. Box 73208 Chicago, IL 60673-7208

Advocate-Lutheran General Hospital 1775 Dempster Street Park Ridge, IL 60068

Alexian Brothers Medical Center 800 Biesterfield Road Elk Grove Village, IL 60007

Armor Systems Corporation 1700 Kiefer Drive Suite 1 Zion, IL 60099-5105

Baker, Miller, Markoff & Krasny, LLC 29 North Wacker Drive 5th Floor Chicago, IL 60606-3221

Blatt, Hasenmiller, Leibsker & Moore 125 South Wacker Drive Suite 400 Chicago, IL 60606-4440

Capital One Bank
P.O. Box 30285
Salt Lake City, UT 84130-0285

Children's Memorial Hospital 2300 Chirldren's Plaza Chicago, IL 60614

ComEd Bill Payment Center Chicago, Il 60668-0002

Diagnostic Imaging Assoc. PO Box 68
Northbrook, IL 60065-0068

Discover Bank P.O. Box 30943 Salt Lake City, UT 84130

Dominion Retail c/o CBCS 236 East Town Street PO Box 1838 Columbus, OH 43215

Endodontic Assoc. of Park Ridge, Ltd. c/o Mages & Price
102 Wilmot Road
Suite 410
Deerfield, IL 60015

ENH Medical Group Specialty Practice 23139 Network Place Chicago, IL 60673-1231

Evanston Northwestern Healthcare 23056 Network Place Chicago, IL 60673-1230

First Premier Bank P.O. Box 5524 Sioux Falls, SD 57117-5524

Ford Credit P.O. Box 542000 Omaha, NE 68154-8000 Golf Diag Image c/o ACC International 919 Estes Court Schaumburg, IL 60193-4427

Golf-Western Surgical Specialists 8901 Golf Road Suite 305 Des Plaines, IL 60016-4029

IL Bone & Joint Institute 135 South LaSalle Dept 1052 Chicago, IL 60674-1052

Life Watch Holding Corp. PO Box 24475 Cleveland, OH 44124

Malcolm S. Gerald and Associates, Inc. 322 South Michigan Avenue Suite 600 Chicago, IL 60604

MEA Elk Grove LLC PO Box 366 Hinsdale, IL 60522

MEA Medical Care Centers Dept. 4043 PO Box 3594 Oak Brook, IL 60522

MEA Medical Care Centers, LLC Dept 20-6007 PO Box 5990 Carol Stream, IL 60197

Medical Business Bureau, Inc. P.O. Box 1219
Park Ridge, IL 60068-7219

Medical Recovery Specialists, Inc. 2350 East Devon Avenue Suite 352 Des Plaines, IL 60018

Midwest Diagnostic Pathology SC 75 Remittance Drive Suite 3070 Chicago, IL 60675-3070

NCO Financial Systems, Inc. P.O. Box 15630 Dept 99 Wilmington, DE 19850

Neurolgy Specialists of Northern IL PO Box 2823 Carol Stream, IL 60132-0001

Nicor Gas P.O. Box 416 Aurora, IL 60568-0001

OSI Collection Services, Inc. P.O. Box 959
Brookfield, WI 53008-0959

Pain Care Consultants, SC 185 Penny Avenue Dundee, IL 60118

Park Ridge Anesthesiology PO Box 1123 Jackson, MI 49204-1123

Parkside Magnetic Resonance Center 1875 Dempster Street Suite G06 Park Ridge, IL 60068-1163

Quest Diagnostics Incorporated P.O. Box 64804 Baltimore, MD 21264-4804

Resurrection Medical Center 7435 West Talcott Avenue Chicago, IL 60631

RMC Emergency Physicians 520 East 22nd Street Lombard, IL 60148

Target National Bank PO Box 59317 Minneapolis, MN 55459-0317

The Ear, Nose & Throat Center 1875 Dempster Street Suite 301 Park Ridge, IL 60068

United Recovery Systems Incorporated 5800 North Course Drive Houston, TX 77072

Van Ru Credit Corporation 1350 East Touhy Avenue Suite 100E Des Plaines, IL 60018-3307